Accepted TOC C Eathrugan 1-7-09

PRINTED: 12/16/2008
FORM APPROVED

Bureau of Licensure and Certification

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	NVS214AGC	A. BUILDING _____ B. WING _____	12/09/2008

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GOOD SHEPHERD REST HOME 4	4089 E BOSTON AVENUE LAS VEGAS, NV 89104

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	Initial Comments This Statement of Deficiencies was generated as a result of the annual state licensure survey conducted at your facility on 12/9/08. This survey was conducted using Nevada Administrative Code (NAC) 449, Residential Facility for Groups Regulations, adopted by the Nevada State Board of Health on July 14, 2006. The facility was licensed for 6 Category 1 beds. The facility had an endorsement to care for elderly or disabled persons and/or persons with mental illnesses. The census at the time of the survey was six. Six resident records were reviewed. One closed record was reviewed. Three employee files were reviewed. There were no complaints investigated during the survey. The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. The following regulatory deficiencies were identified:	Y 000	RECEIVED JAN 0 5 2009 BUREAU OF LICENSURE AND CERTIFICATION LAS VEGAS, NEVADA	
Y 070 SS=F	449.196(1)(f) Qualifications of Caregiver-8 hours training NAC 449.196 1. A caregiver of a residential facility must:	Y 070		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: C. M. Quest — TITLE: Administrator — (X6) DATE: 1-5-09

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Y 070	Continued From page 1 (f) Receive annually not less than 8 hours of training related to providing for the needs of the residents of a residential facility. This Regulation is not met as evidenced by: Based on record review, the facility failed to ensure not less than eight hours of training related to providing for the needs of the residents had been received annually by 3 of 3 employees. Findings include: Employee #1 was hired as the administrator on 12/1/94. The file for Employee #1 lacked documented evidence of eight hours of training for mentally ill persons for the past year. Employee #2 was hired as a caregiver on 9/15/08. The file for Employee #2 lacked documented evidence of eight hours of training for mentally ill persons. Employee #3 was hired as a caregiver on 12/1/94. The file for Employee #3 lacked documented evidence of eight hours of training for mentally ill persons for the past year. Severity: 2 Scope: 3	Y 070	Y070 a) After the survey, the 3 employees were scheduled to attend a training for persons with mental illness. They attended the training on Dec. 29 - 30, 2008. b) All employees files will be reviewed at least every 6 months to ensure completion of the CEU requirements. The administrator will monitor for the compliance. c) Attachment #1. d) 1-3-09.	
Y 108 SS=F	449.200(3) Per File - Storage & Availability	Y 108		

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Y 108	Continued From page 2 NAC 449. 200 3. The administrator may keep the personnel files for the facility in a locked cabinet and may, except as otherwise provided in this subsection, restrict access to this cabinet by other employees of the facility. Copies of the documents which are evidence that an employee has been certified to perform first aid and cardiopulmonary resuscitation and that the employee has been tested for tuberculosis must be available for review at all times. The administrator shall make the personnel files available for inspection by the bureau within 72 hours after the bureau requests to review the files. This Regulation is not met as evidenced by: Based on record review and interview, the facility failed to ensure annual Tuberculosis (TB) screening had been completed for 1 of 3 employees (#2). Findings include: Employee #2 was hired as a caregiver on 9/15/08. The file for Employee #2 contained evidence of a negative chest x-ray completed 2/7/07. The file lacked documented evidence of TB screening for the past year.	Y 108	Y108 a) After the survey, Employee #1 did the annual TB symptoms check for employee #2. She is due for her next annual TB and physical exam on 2-7-09. Employee #1 ensures that it will be done before the due date. b) Employees files will be audited at least every 6 months to ensure employees with negative chest X-rays results be screened for TB symptoms before their annual TB and physical. The administrator will monitor the compliance. c) Attachment #2. d) 1-3-09 RECEIVED JAN 05 2009 BUREAU OF LICENSURE AND CERTIFICATION LAS VEGAS, NEVADA	

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Y 108	Continued From page 3 Severity: 2 Scope: 3	Y 108		
Y1010 SS=C	449.2764(1) MI Training NAC 449.2764 1. A person who provides care for a resident of a residential facility for persons with mental illnesses shall, within 60 days after he becomes employed at the facility, attend not less than 8 hours of training concerning care for residents who are suffering from mental illnesses. This Regulation is not met as evidenced by: Based on record review, the facility failed to ensure not less than eight hours of training was received within 60 days after employment by 1 of 3 employees (#2). Findings include: Employee #2 was hired as a caregiver on 9/15/08. The file for Employee #2 lacked documented evidence eight hours of training for mentally ill persons since 9/15/08. Severity: 1 Scope: 3	Y1010	Y1010 a) Employee #1 had her training for persons with mental illness on 12-30-08. Her file is now updated. b) Employee #1 will ensure that training for persons with mental illness be done and documented with 60 days from date of hire. The administrator is responsible for the practise. c) Attachment #3. d. 1-3-09.	